

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004958

FILED
Apr 06, 2009
Secretary of State

Entity Name: MASTER BROKERS FORUM OF BROWARD COUNTY, INC.

Current Principal Place of Business:

JOHN BEAUCHAMP, INTERCOASTAL REALTY
1500 LAS OLAS BLVD
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

JOHN BEAUCHAMP, INTERCOASTAL REALTY
1500 LAS OLAS BLVD
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 16-1722004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARCIA, MARIA T
1111 BRICKELL AVE STE #2150
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLERT, CAROLYN B
Address: 500 W CYPRESS CREEK RD #380
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: VP () Delete
Name: KEAGY, PHIL
Address: 777 SO FEDERAL HWY
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S () Delete
Name: SINGER, TIM
Address: 940 SE 17 ST CAUSEWAY
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: T () Delete
Name: BEAUCHAMP, JOHN
Address: 1500 LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN BEAUCHAMP

TREA

04/06/2009

Electronic Signature of Signing Officer or Director

Date